

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT

FORM B

For New Members, Candidates, and New Employees

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)Name: David Callahan

Daytime Telephone.

FILER STATUS	New Member of or Candidate for U.S. House of Representatives	State: <u>CA</u> District: <u>13th</u>	Check if Amendment
	Candidate - Date of Election: <u>MAY 22, 2018 PLEN</u>	Staff Filer Type (If Applicable): <input type="checkbox"/> Principal Assistant <input type="checkbox"/> Shared	
New Officer or Employee Employing Office: _____		Period Covered: January 1, 2018 to <u>APRIL 22, 2018</u> MARCH 31	

(Signature)
A \$200 penalty shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Receive more than \$200 in unearned income from any reportable asset during the reporting period? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	G. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"
THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "exempted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: David Alan Callahan

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BLOCK A		BLOCK B		BLOCK C		BLOCK D																																
Assets and/or Income Sources		Value of Asset		Type of Income		Amount of Income																																
<p>Identity (a) each asset held for investment or exceeding \$1,000 at the end of the reporting period, specify the method used.</p> <p>and (b) any other reportable asset or source of income which generated more than \$200 in “unearned” income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use only ticker symbols).</p>		<p>For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.</p> <p>For bank and other cash accounts, total the amount in all interest-bearing accounts, if the total is over \$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.</p> <p>For rental and other real property held for investment, provide a complete address or description, e.g., rental property, and a city and state.</p>		<p>Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used.</p> <p>If an asset was sold during the reporting period and is included only because it generated income, the value should be “None”.</p>		<p>Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the “Tax-Deferred” column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check “None” if no income was earned or generated.</p> <p>“Column M is for assets held by your spouse or dependent child in which you have no interest.</p>																																
Sp. DC	EF	A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
<p>Examples:</p> <p>Simon & Schuster</p> <p>ABC Hedge Fund</p>		<p>None</p> <p>\$1-\$1,000</p> <p>\$1,001-\$15,000</p> <p>\$15,001-\$50,000</p> <p>\$50,001-\$100,000</p> <p>\$100,001-\$250,000</p> <p>\$250,001-\$500,000</p> <p>\$500,001-\$1,000,000</p> <p>\$1,000,001-\$5,000,000</p> <p>\$5,000,001-\$25,000,000</p> <p>\$25,000,001-\$50,000,000</p> <p>Over \$50,000,000</p> <p>Spouse/DC Asset over \$1,000,000*</p>		<p>NONE</p> <p>DIVIDENDS</p> <p>RENT</p> <p>INTEREST</p> <p>CAPITAL GAINS</p> <p>EXCEPTED/BLIND TRUST</p> <p>TAX-DEFERRED</p>		<p>Other Type of Income (Specify: e.g., Partnership income or Farm income)</p> <p>None</p> <p>\$1-\$200</p> <p>\$201-\$1,000</p> <p>\$1,001-\$2,500</p> <p>\$2,501-\$5,000</p> <p>\$5,001-\$15,000</p> <p>\$15,001-\$50,000</p> <p>\$50,001-\$100,000</p> <p>\$100,001-\$1,000,000</p> <p>\$1,000,001-\$5,000,000</p> <p>Over \$5,000,000</p> <p>Spouse/DC Income over \$1,000,000*</p>		<p>Current Year</p>		<p>Preceding Year</p>																												
<p>Realty Advocate</p> <p>LSC Communications</p> <p>Donnelly Financial</p> <p>Donnelly Retirement</p>		<p>None</p> <p>✓</p> <p>✓</p> <p>✓</p>		<p>None</p> <p>✓</p> <p>✓</p> <p>✓</p>		<p>None</p> <p>✓</p> <p>✓</p> <p>✓</p>		<p>None</p> <p>✓</p> <p>✓</p> <p>✓</p>		<p>None</p> <p>✓</p> <p>✓</p> <p>✓</p>																												

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

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ASSET NAME	BLOCK A Value of Asset	BLOCK B Type of Income	BLOCK C Amount of Income	BLOCK D Current Year											
				A	B	C	D	E	F	G	H	I	J	K	L
VALUATED HIGH DIV. YTD INDEX FUND	None														
LOAN TO FRIENDS OF INCOME FUND OF AMERICA	\$1,001-\$15,000														
Keed Biz Simolelle	\$50,001-\$100,000														
LINCOLN CHOICE PLUS VARIABLE ANNUITY	\$100,001-\$250,000														
BUISSES LIFE PLUS VARIABLE DEF. PLAN	\$250,001-\$500,000														
BROKERS LIFE OF S. B. & A.	\$500,001-\$1,000,000														
GABELL UTILITIES FUND	\$1,000,001-\$5,000,000														
INCOME FUND OF AMERICA	Over \$5,000,000														
	Spouse/DC Asset over \$1,000,000*														
	None														
	DIVIDENDS														
	RENT														
	INTEREST														
	CAPITAL GAINS														
	EXCEPTED/BLIND TRUST														
	INVESTMENT														
	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)														
	None														
	\$1-\$200														
	\$201-\$1,000														
	\$1,001-\$2,500														
	\$2,501-\$5,000														
	\$5,001-\$15,000														
	\$15,001-\$50,000														
	\$50,001-\$100,000														
	\$100,001-\$1,000,000														
	Over \$1,000,000														
	Spouse/DC Income over \$1,000,000*														
	None														
	\$1-\$200														
	\$201-\$1,000														
	\$1,001-\$2,500														
	\$2,501-\$5,000														
	\$5,001-\$15,000														
	\$15,001-\$50,000														
	\$50,001-\$100,000														
	\$100,001-\$1,000,000														
	Over \$1,000,000														
	Spouse/DC Income over \$1,000,000*														

Use additional sheets if more space is required.

SCHEDULE D – LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

SCHEDULE E – POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members and second-year candidates** report positions held in the reporting period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and two previous years.

Position	Name of Organization
Proprietor	Keep It Simple LLC